FRANCISCAN WOODS

19525 WEST NORTH A

BROOKFIELD 53045 Phone: (262) 784-1114		Ownership:	Nonprofit Church/Corporation
Operated from 1/1 To 12/31 Days of Operation:	365	Highest Level License:	Skilled
Operate in Conjunction with Hospital?	Yes	Operate in Conjunction with CBRF?	No
Number of Beds Set Up and Staffed (12/31/03):	120	Title 18 (Medicare) Certified?	Yes
Total Licensed Bed Capacity (12/31/03):	120	Title 19 (Medicaid) Certified?	Yes
Number of Residents on 12/31/03:	110	Average Daily Census:	110

Services Provided to Non-Residents		Age, Gender, and Primary Di	agnosis	of Residents	(12/31/03)	Length of Stay (12/31/03)	%
Home Health Care Supp. Home Care-Personal Care	No No	Primary Diagnosis	용 	. 5 1 -	ફ ફ		19.1 30.9
Supp. Home Care-Household Services Day Services	No No	Developmental Disabilities Mental Illness (Org./Psy)	0.0	•	1.8 11.8		10.0
Respite Care	No	Mental Illness (Other)	0.9	75 - 84	35.5	 	60.0
Adult Day Care Adult Day Health Care	No No	Alcohol & Other Drug Abuse Para-, Quadra-, Hemiplegic	0.0	85 - 94 95 & Over	40.0 10.9	************************************	*****
Congregate Meals Home Delivered Meals	No No	Cancer Fractures	0.0		100.0	, F	idents
Other Meals	No	Cardiovascular	6.4	65 & Over	98.2	Í	
Transportation Referral Service	No No	Cerebrovascular Diabetes	1.8	 Gender	용	RNs LPNs	13.9 14.5
Other Services Provide Day Programming for	No	Respiratory Other Medical Conditions		 Male	23.6	Nursing Assistants, Aides, & Orderlies	37.9
Mentally Ill	No	Concr nearest constraint		Female	76.4	· ·	37.3
Provide Day Programming for Developmentally Disabled	No	 	100.0	 	100.0		

Method of Reimbursement

		edicare itle 18			edicaid itle 19			Other			Private Pay			amily Care		į	Managed Care	l		
Level of Care	No.	90	Per Diem (\$)	No.	90	Per Diem (\$)	No.	엉	Per Diem (\$)	No.	양	Per Diem (\$)	No.	%	Per Diem (\$)	No.	엉	Per Diem (\$)	Total Resi- dents	- Of
Int. Skilled Care	 28	100.0	332	 1	2.6	146	0	0.0	0	1	2.6	235	0	0.0	0	 4	100.0	325	34	30.9
Skilled Care	0	0.0	0	32	84.2	126	1	100.0	210	38	97.4	210	0	0.0	0	0	0.0	0	71	64.5
Intermediate				5	13.2	105	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	5	4.5
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depende	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	28	100.0		38	100.0		1	100.0		39	100.0		0	0.0		4	100.0		110	100.0

Facility ID: 3510 County: Waukesha Page 2 FRANCISCAN WOODS

Admissions, Discharges, and		Percent Distributior	n of Residents'	Condit	ions, Services,	and Activities as of 12/	31/03
Deaths During Reporting Period							
	I				% Needing		Total
Percent Admissions from:	I	Activities of	용		sistance of	2	Number of
Private Home/No Home Health	1.4	- 2 2 ,	Independent	One	Or Two Staff	±.	Residents
Private Home/With Home Health	0.0	Bathing	0.0		60.0	40.0	110
Other Nursing Homes	0.4	Dressing	4.5		55.5	40.0	110
Acute Care Hospitals	97.8	Transferring	10.0		51.8	38.2	110
Psych. HospMR/DD Facilities	0.0	Toilet Use	10.9		51.8	37.3	110
Rehabilitation Hospitals	0.4	Eating	50.0		38.2	11.8	110
Other Locations	0.0	******	******	*****	******	******	*****
otal Number of Admissions	558	Continence		용	Special Treat	ments	용
ercent Discharges To:	1	Indwelling Or Exterr	nal Catheter	10.0	Receiving F	Respiratory Care	6.4
Private Home/No Home Health	23.0	Occ/Freq. Incontiner	nt of Bladder	44.5	Receiving T	racheostomy Care	0.0
Private Home/With Home Health	32.9	Occ/Freq. Incontiner	nt of Bowel	37.3	Receiving S	Suctioning	0.9
Other Nursing Homes	2.1				Receiving C	stomy Care	1.8
Acute Care Hospitals	12.1	Mobility			Receiving T	ube Feeding	3.6
Psych. HospMR/DD Facilities	0.0	Physically Restraine	ed	0.0	Receiving M	Mechanically Altered Diets	28.2
Rehabilitation Hospitals	0.0				_	-	
Other Locations	10.9 i	Skin Care			Other Resider	t Characteristics	
Deaths	19.0 i	With Pressure Sores		13.6	Have Advanc	e Directives	87.3
otal Number of Discharges	i	With Rashes		4.5	Medications		
(Including Deaths)	562 i				Receiving E	sychoactive Drugs	69.1

	This	Other Hospital-	
	Facility	Based Facilities	Facilties
	용	% Ratio	% Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	91.7	90.1 1.02	87.4 1.05
Current Residents from In-County	58.2	83.8 0.69	76.7 0.76
Admissions from In-County, Still Residing	5.9	14.2 0.42	19.6 0.30
Admissions/Average Daily Census	507.3	229.5 2.21	141.3 3.59
Discharges/Average Daily Census	510.9	229.2 2.23	142.5 3.59
Discharges To Private Residence/Average Daily Census	285.5	124.8 2.29	61.6 4.63
Residents Receiving Skilled Care	95.5	92.5 1.03	88.1 1.08
Residents Aged 65 and Older	98.2	91.8 1.07	87.8 1.12
Title 19 (Medicaid) Funded Residents	34.5	64.4 0.54	65.9 0.52
Private Pay Funded Residents	35.5	22.4 1.58	21.0 1.69
Developmentally Disabled Residents	0.0	1.2 0.00	6.5 0.00
Mentally Ill Residents	10.9	32.9 0.33	33.6 0.32
General Medical Service Residents	65.5	22.9 2.85	20.6 3.19
Impaired ADL (Mean) *	59.5	48.6 1.22	49.4 1.20
Psychological Problems	69.1	55.4 1.25	57.4 1.20
Nursing Care Required (Mean)*	7.4	7.0 1.06	7.3 1.01